## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

**Application or Docket Number** 

09974621

		CLAIMS AS	FILED - (Column	ED - PART I olumn 1) (Column 2)				SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			8				ſ	RATE	FEE	) 	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS					. 5			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			7 minus 3 =		6		ľ	X40=		OR	X80=	
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					+135=		OR	+270=	
, *:  f	the difference	in column 1 is	less than zero, enter "0" in o			olumn 2	ı	TOTAL		OR	TOTAL	710
	C	LAIMS AS A	MENDED	ENDED - PART II							OTHER	
		(Column 1)	(Column 2)			(Column 3)	_	SMALL	ENTITY	OR	SMALL E	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF MI	ULTIPLE DEF	PENDEN	T CLAIM		ľ	+135=		OR	+270=	
							l	TOTAL			TOTAL	
		(Calumn 1)		(Colu	mn 2)	(Column 3)	,	ADDIT. FEE		<b>1</b> 011,	ADDIT. FEE	<u>.                                    </u>
_		(Column 1) CLAIMS		HIGI	HEST	(Column 3)	lr		ADDI-	1		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		=		X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=	-		+270=	
							L	+135=		OR	TOTAL	
							,	ADDIT. FEE		OR	ADDIT. FEE	
		(Column 1)			ımn 2) HEST	(Column 3)	1 -					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUN PREV	MBER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	<u> </u>	X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	JLTIPLE DEPENDEN		IT CLAIM	CLAIM						
						-1 0		+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
۱ "	*If the "Highest Nu	umber Previously F	Paid For" IN TH	IIS SPACE	is less th	an 3, enter "3."			propriate bo	x in co	olumn 1.	

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